

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	TELEPHONE NO.:	FOR COURT USE ONLY
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:		
NOTICE OF MOTION FOR JUDICIAL REVIEW OF LICENSE DENIAL		CASE NUMBER:

See reverse for instructions.

1. On (date): _____ the District Attorney of (specify county): _____
 denied a release form that would enable me to obtain the following license (specify): _____

Name and address of licensing agency: _____

2. I seek a judicial review of the district attorney's denial on the following grounds (check all that apply):

- a. ☐ There is no order for me to pay child support in this action.

- b. ☐ I am not the person ordered to pay support in this action.

- c. ☐ I am in compliance with the order to pay child support in this action.

- d. ☐ I am in compliance with payments on the schedule for payment of arrearages or reimbursement.

- e. ☐ Other (specify): _____

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

.....

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

3. A hearing on this motion will be held:

Date: Address:	Time:	Room:
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(See reverse for proof of service and instructions)

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	

This motion should be filed with a hearing scheduled as soon as possible after your district attorney review.

INSTRUCTIONS

1. Complete the application on the reverse. Contact the clerk of the court for a hearing date, time, and place. Insert the information in box 3 on the reverse.
2. File the original Notice of Motion for Judicial Review of License Denial with the court and keep two copies because you will need them later.
3. Serve a copy of this form on the district attorney who has certified your name for nonpayment of child support not later than seven days after the filing in court. Service of the papers may be made by (a) personal delivery OR (b) mailing the papers by first-class mail, postage prepaid, to the last known address of the other party. Anyone at least 18 years of age EXCEPT A PARTY may personally serve or mail the papers. Be sure whoever serves the papers fills out and signs the proof of service below.

PROOF OF SERVICE

4. At the time of service I was at least 18 years of age and not a party to this legal proceeding.
5. I served a copy of the Notice of Motion for Judicial Review of License Denial in the manner shown below.
6. Manner of service on **DISTRICT ATTORNEY**
 - a. ☐ **Personal service.** I personally delivered these papers to the district attorney as follows:
 - (1) District attorney (*name*):
 - (2) Address where served:
 - (3) Date delivered:
 - (4) Time delivered:
 - b. ☐ **First-class mail.** I deposited these papers with the United States Postal Service, in a sealed envelope with postage fully prepaid. I am a resident of or employed in the county where the notice was mailed. The envelope was addressed and mailed as follows:
 - (1) District attorney (*name*):
 - (2) Address on envelope:
 - (3) Date mailed:
 - (4) Place of mailing (*city, state*):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

.....
(SIGNATURE OF PERSON WHO SERVED THE NOTICE)

.....
(SIGNATURE OF PERSON WHO SERVED THE NOTICE)